



Town of Grafton

Building Department

30 Providence Road

Grafton, MA. 01519

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Robert S. Berger

Inspector of Buildings

Zoning Enforcement Officer

POOL PERMIT APPLICATION

PLEASE ATTACH PLOT PLAN

Date: _____ Map: _____ Lot: _____

Owner: _____ Address: _____

Owners Phone No: _____

Contractor/Installer: _____ Address: _____

Contractor/Installer Phone#: _____

GENERAL INFORMATION

Type: _____ Estimated Cost: _____

Length: _____ Width: _____ Volume: _____

Round: _____ Oval: _____ Oblong: _____

Source of Water: _____

PLANS SUMITTED FOR APPROVAL

Size: Swimming Area (sqft.): _____

Non Swimming Area (sqft): _____

Maximum Pool Capacity (persons): _____

Trim and Finish: _____

Minimum Width: _____

Decking Type: _____

Deck dimension: _____

MECHANICAL INFORMATION

Type of Filter: _____

Total Filter Area (sqft): _____

Circulation Rate g.m.p.: _____

Backwash Rate g.m.p.: _____

Turnover Rate in hrs: _____

Skimmers: _____ Number: _____

Chlorinator Type: _____

Capacity: _____

Chemical Feeders: _____

Capacity: _____ Quantity: _____

APPLICANTS SIGNATURE: _____ PHONE: _____

BUILDING INSPECTOR: _____ DATE: _____

Permit Number: _____

Fee: _____

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